FY 2016-17 FEE SCHEDULE

Fee Description	Authority	Fee Amount	Unit Desc.	Comments
LABORATORY DIVISION				
Laboratory Fees	**H&S Code 101150 & 101155**			See Footnote 1 for all fees
Aeromonas-Plesiomonas culture		$32.00	each	
Antibiotic susceptibility testing		$33.00	each	
Bacteriologic Isolate ID		$108.00	each	
Bacteriology primary culture		$67.00	each	
Blood lead		$30.00	each	
Bordetella PCR		$116.00	each	
Campylobacter culture		$31.00	each	
Chlamydia amplified assay batch size 50		$41.00	each	
Chlamydia amplified assay batch size 100		$34.00	each	
Chlamydia amplified assay batch size 200		$28.00	each	
Coccidioides immitis probe		$71.00	each	
Coccidioides PCR		$116.00	each	
Comprehensive Parasitology Panel		$189.00	each	
Comprehensive Stool Culture		$193.00	each	
Concentration		$19.00	each	
Cryptosporidium-Giardia DFA		$55.00	each	
Cyclospora direct exam		$77.00	each	
Direct microscope exam, food		$123.00	each	
Domoic acid, shellfish meat		$179.00	each	
E coli shigatoxin-producing, culture		$33.00	each	
Enteric pathogens culture, food		$136.00	each	
Enterococci, MPN		$25.00	each	
Fecal coliforms, shellfish meat		$132.00	each	
Fecal coliforms, water		$49.00	each	
Gastrointestinal Pathogen PCR Panel		$252.00	each	
Gonorrhea amplified assay batch size 50		$41.00	each	
Gonorrhea amplified assay batch size 100		$34.00	each	

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Fee Description	Authority	Fee Amount	Unit Desc.	Comments
Gonorrhea amplified assay batch size 200		$30.00	each	
Gram stain		$24.00	each	
Helminth-Arthropod identification		$37.00	each	
Herpes Virus culture		$62.00	each	
Herpes virus fluorescent antibody confirmation		$55.00	each	
Heterotrophic Plate Count		$30.00	each	
HIV antibody differentiation test		$56.00	each	
HIV antibody, Western blot, oral fluid		$133.00	each	
HIV 1,2+0 antibody, EIA, oral fluid batch size 50		$26.00	each	
HIV 1,2+0 antibody, EIA, oral fluid batch size 100		$22.00	each	
HIV 1,2+0 antibody, EIA, oral fluid batch size 200		$18.00	each	
HIV 1,2+0 antibody, EIA, serum batch size 50		$30.00	each	
HIV 1,2+0 antibody, EIA, serum batch size 100		$23.00	each	
HIV 1,2+0 antibody, EIA, serum batch size 200		$22.00	each	
Human Papilloma Virus amplified assay		$58.00	each	
Influenza virus PCR		$116.00	each	
Isospora special direct exam		$66.00	each	
M. avium complex probe		$66.00	each	
M. gordonae probe		$66.00	each	
M. kansasii probe		$66.00	each	
M. tuberculosis amplification test		$87.00	each	
M. tuberculosis complex probe		$66.00	each	
Measles Virus PCR		$116.00	each	
Microsporidia special direct exam		$66.00	each	
Misc. testing per hour		$127.00	each	
Mumps Virus PCR		$116.00	each	
Mycobacterial isolate ID		$107.00	each	
Mycologic isolate ID		$107.00	each	
Mycology culture & identification		$84.00	each	
Mycology direct exam		$31.00	each	

Public Health - Laboratory
16010

FY 2016-17 FEE SCHEDULE

Fee Description	Authority	Fee Amount	Unit Desc.	Comments
N gonorrhoeae culture		$24.00	each	
Non-diagnostic health assessment -single event program		$85.00	each	
Non-diagnostic health assessment-multiple event program		$125.00	each	
Norovirus PCR		$116.00	each	
Nucleic acid extraction		$17.00	each	
Ova and Parasites		$53.00	each	
Parasite blood smear exam		$39.00	each	
Parasite Exam - Trichrome		$39.00	each	
Parasite wet mount, feces		$48.00	each	
Pinworm Examination		$30.00	each	
Pox virus PCR		$116.00	each	
Pseudomonas Count		$24.00	each	
Quantiferon batch size 17		$53.00	each	
Quantiferon batch size 50		$43.00	each	
Quantiferon batch size 100		$38.00	each	
Rabies DFA		$104.00	each	
Respiratory Illness Agent PCR Panel		$383.00	each	
Respiratory Virus Agent PCR Panel		$218.00	each	
RPR, serum		$22.00	each	
RPR, serum, titer		$41.00	each	
Salinity		$7.00	each	
Salmonella culture		$26.00	each	
Shigatoxin		$54.00	each	
Shigella culture		$29.00	each	
Standard Parasitology Panel		$177.00	each	
Stool culture		$81.00	each	
Stool Culture isolate ID		$105.00	each	
Streptococcus Culture		$28.00	each	
Surface Sanitation Culture		$24.00	each	
TB culture & identification batch size 2		$75.00	each	
TB culture & identification batch size 100		$51.00	each	
TB culture & identification batch size 200		$47.00	each	
TB fluorescent smear		$29.00	each	
TB fluorescent smear (urgent)		$134.00	each	

Public Health - Laboratory
16010

FY 2016-17 FEE SCHEDULE

Fee Description	Authority	Fee Amount	Unit Desc.	Comments
Tick Identification		$26.00	each	
Total coliforms-Ecoli,MPN		$27.00	each	
Total coliforms-Ecoli, MPN presence/absence batch size 50		$23.00	each	
Total coliforms-Ecoli, MPN presence/absence batch size 100		$20.00	each	
Total coliforms-Ecoli, MPN presence/absence batch size 200		$19.00	each	
TP-PA		$57.00	each	
Trichomonas vaginalis amplified assay		$49.00	each	
Urgent Charge - per episode (Testing done outside regularly scheduled hours)		$130.00	each	
Urine culture		$43.00	each	
Varicella zoster antibody		$43.00	each	
Varicella Zoster PCR		$116.00	each	
VDRL, CSF		$30.00	each	
Vibrio culture		$38.00	each	
Virus culture		$68.00	each	
Wet prep vaginal		$41.00	each	
Yersinia enterocolitica culture		$38.00	each	

Department Name: Public Health - Laboratory
Fund Center: 16010

Footnote #	Footnote Narrative
1	Under the authority of the Health Officer and mandate of the Department of Public Health to prevent the spread of communicable diseases or occurrence of additional cases (California Health and Safety Code section 120175), fees may be waived or reduced to an amount a patient is able to pay